PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/527,659			ing Date 08/2005	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			NUMBER FI	LED NL	NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A]	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		N/A]	N/A	
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A		N/A		N/A			N/A	
TO (37	TAL CLAIMS CFR 1.16(i))		mi	minus 20 = *		l	x \$ = 1		OR	x s =	
INE (37	EPENDENT CLAIN CFR 1.16(h))	is	minus 3 = *			1	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is	heets of pap s \$250 (\$125 additional 50	gs exceed 100 on size fee due for each in thereof. See CFR 1.16(s).							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL	
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	01/26/2009	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	• 19	Minus	 20	= 0]	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	3	= 0]	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column	1)	(Column 2)	(Column 3)						
L		CLAIMS REMAININ AFTER AMENDME	IG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Ä	Total (37 CFR 1,16())		Minus			1	x \$ =		OR	x s =	
Σ	Independent (37 CFR 1.16(h))	*	Minus	***	:]	x \$ =		OR	x \$ =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					Į			ı		
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR		
									OR	TOTAL ADD'L FEE	
"If the entry in column 1 is less than the entry in column 2, write "or in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 1, enter "3". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 1, enter the previously Paid For "(To ITHIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "4". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less than 2, enter "20". The "Highest Number Previously Paid For" (To ITHIS SPACE is less t											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is 16 life (and by the USPTIO to process) an application. Confidentiality is governed by 30 US. of 22 and 37 CFR 1.4. This collection is estimated to be 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTIO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Platents, P.O. Box 1450, Alexandria, VA 22313-1450.